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|--|--|------------------------|------------------|
| <h1 style="text-align: center;">TRANSMITTAL<br/>FORM</h1> <p style="text-align: center;"><i>(to be used for all correspondence after initial filing)</i></p> |  | Application Number     | 09/806,400       |
|  |  | Filing Date            | March 30, 2001   |
|  |  | First Named Inventor   | Yehuda Shoenfeld |
|  |  | Art Unit               | 1644             |
|  |  | Examiner Name          | R. B. Schwadron  |
| Total Number of Pages in This Submission   |  | Attorney Docket Number | 25619-501US      |

## ENCLOSURES (Check all that apply)

|   |  |   |
|---|--|---|
| <input type="checkbox"/> Fee Transmittal Form<br><input type="checkbox"/> Fee Attached<br><input checked="" type="checkbox"/> Amendment/Reply<br><input type="checkbox"/> After Final<br><input type="checkbox"/> Affidavits/declaration(s)<br><input type="checkbox"/> Extension of Time Request<br><input type="checkbox"/> Express Abandonment Request<br><input checked="" type="checkbox"/> Information Disclosure Statement<br><input type="checkbox"/> Certified Copy of Priority Document(s)<br><input type="checkbox"/> Reply to Missing Parts/Incomplete Application<br><input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Drawing(s)<br><input type="checkbox"/> Licensing-related Papers<br><input type="checkbox"/> Petition<br><input type="checkbox"/> Petition to Convert to a Provisional Application<br><input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address<br><input type="checkbox"/> Terminal Disclaimer<br><input type="checkbox"/> Request for Refund<br><input type="checkbox"/> CD, Number of CD(s) _____<br><input type="checkbox"/> Landscape Table on CD | <input type="checkbox"/> After Allowance Communication to TC<br><input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences<br><input type="checkbox"/> Appeal Communication to TC ( <b>Appeal Notice, Brief, Reply Brief</b> )<br><input type="checkbox"/> Proprietary Information<br><input type="checkbox"/> Status Letter<br><input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):<br>Modified PTO SB/08 and Copies of References Cited |
| <div style="border: 1px solid black; padding: 5px; width: fit-content;">Remarks</div>   |  |   |

## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

|              |   |          |        |
|--------------|---|----------|--------|
| Firm Name    | MINTZ LEVIN COHN FERRIS GLOVSKY AND POPEO, P.C. |          |        |
| Signature    | / Matthew Pavao /                               |          |        |
| Printed name | Matthew Pavao, J.D., Ph.D.                      |          |        |
| Date         | November 16, 2010                               | Reg. No. | 50,572 |